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OF PAGES (INCLUDING COVER): 14 FILE NAME: PHRM0027-101 (00159)
DATE: September 7, 2004 FILE #: 130907

RECIPIENT(S)	PHONE	FAX
Examiner Emily B. Bernhardt U.S. PATENT AND TRADEMARK OFFICE GROUP ART UNIT 1624	571.272.0664	703.872.9306

MESSAGE: OFFICIAL FAX!

Serial No.: 09/738,022 - Filing Date: December 15, 2000

Attachments: Transmittal form (1 sheet)
Fee Transmittal (w/auth to charge deposit acct) (no fee) (1 sheet)
Response (11 sheets)

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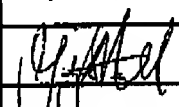
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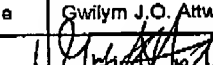
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/738,022
	Filing Date	December 15, 2000
	First Named Inventor	Thomasco et al.
	Art Unit	1824
	Examiner Name	Emily P. Bernhardt
Total Number of Pages in This Submission	Attorney Docket Number	PHRM0027-101 (00159)

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) ____	<input type="checkbox"/> After Allowance Communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): FACSIMILE COVER SHEET
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Gwilym J.O. Attwell, Regls. No. 45,449
Signature	
Date	September 7, 2004

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted (1.703.872.9306) to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
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Signature			

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FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 0

Complete if Known

Application Number 09/738,022
 Filing Date December 15, 2000
 First Named Inventor Thomasco et al.
 Examiner Name Emily B. Bernhardt
 Art Unit 1624
 Attorney Docket No. PHRM0027-101/130907

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None

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COZEN O'CONNOR

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FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
		1001	770	Utility filing fee	
		1002	340	Design filing fee	
		1003	530	Plant filing fee	
		1004	770	Reissue filing fee	
		1005	160	Provisional filing fee	

SUBTOTAL (1)

(\$0)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

			Extra Claims		Fee from below		Fee Paid
Total Claims	18	-26 **	= 0	X		=	0
Independent Claims	4	-5 **	= 0	X		=	0
Multiple Dependent				X		=	0

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
		1202	18	Claims in excess of 20	
		1201	66	Independent claims in excess of 3	
		1203	290	Multiple dependent claim, if not paid	
		1204	86	** Reissue independent claims over original patent	
		1205	18	** Reissue claims in excess of 20 and over original patent	

SUBTOTAL (2)

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**or number previously paid. If greater, For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
		1051	130	Surcharge - late filing fee or oath	
		1052	50	Surcharge - late provisional filing fee or cover sheet	
		1053	130	Non-English specification	
		1812	2,520	For filing a request for reexamination	
		1804	920*	Requesting publication of SIR prior to Examiner action	
		1805	1,840*	Requesting publication of SIR after Examiner action	
		1251	110	Extension for reply within first month	
		1252	420	Extension for reply within second month	
		1253	950	Extension for reply within third month	
		1254	1,480	Extension for reply within fourth month	
		1255	2,010	Extension for reply within fifth month	
		1401	330	Notice of Appeal	
		1402	330	Filing a brief in support of an appeal	
		1403	260	Request for oral hearing	
		1451	1,510	Petition to institute a public use proceeding	
		1452	110	Petition to revive - unavoidable	
		1453	1,330	Petition to revive - unintentional	
		1501	1,330	Utility issue fee (or reissue)	
		1502	480	Design issue fee	
		1503	640	Plant issue fee	
		1460	130	Petitions to the Commissioner	
		1807	50	Processing fee under 37 CFR 1.17 (q)	
		1806	180	Submission of Information Disclosure Sheet	
		8021	40	Recording each patent assignment per property (times number of properties)	
		1809	770	Filing a submission after final rejection (37 CFR § 1.129(a))	
		1810	770	For each additional invention to be examined (37 CFR § 1.129(b))	
		1801	770	Request for Continued Examination (RCE)	
		1802	900	Request for expedited examination of a design application	

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

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SUBMITTED BY

Complete (if applicable)

Name (Print/Type) Gwilym J.O. Atwell Registration No. (Attorney/Agent) 45,449 Telephone 215.655.5904
 Signature [Signature] Date September 7, 2004

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